

Fill in this information to identify your case and this filing:

Debtor 1	Joe	Nathan	Woodson
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Aisha	Nicole	Dennis
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern		District of Texas
Case number	24-43704		

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1

Street address, if available, or other description		
_____	_____	_____
City	State	ZIP Code
_____	_____	_____
County		

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

Current value of the portion you own?

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property (see instructions)

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here →

\$0.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No
- Yes

3.1	Make: <u>Chevrolet</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Model: <u>Tahoe</u>	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Debtor 2 only	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> At least one of the debtors and another
Year: <u>2017</u>	<input checked="" type="checkbox"/> Check if this is community property (see instructions)			
Approximate mileage: <u>118000</u>			Current value of the entire property?	Current value of the portion you own?
Other information:			<u>\$14,375.00</u>	<u>\$14,375.00</u>
Source of Value: NADA VIN: 1GNSCBKC4HR250455				

If you own or have more than one, describe here:

3.2	Make: <u>Hyundai</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Model: <u>Santa Fe</u>	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Debtor 2 only	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> At least one of the debtors and another
Year: <u>2014</u>	<input checked="" type="checkbox"/> Check if this is community property (see instructions)			
Approximate mileage: <u>130000</u>			Current value of the entire property?	Current value of the portion you own?
Other information:			<u>\$9,600.00</u>	<u>\$9,600.00</u>
Source of Value: NADA VIN: 5XYZU3LB1EG165213				

3.3	Make: <u>Honda</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Model: <u>Accord</u>	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Debtor 2 only	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> At least one of the debtors and another
Year: <u>2022</u>	<input checked="" type="checkbox"/> Check if this is community property (see instructions)			
Approximate mileage: <u>88000</u>			Current value of the entire property?	Current value of the portion you own?
Other information:			<u>\$18,566.00</u>	<u>\$18,566.00</u>
Source of Value: NADA VIN: (1HGCV1F39NA092279				

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No

Yes

4.1	Make: _____	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Model: _____	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> At least one of the debtors and another
Year: _____	<input checked="" type="checkbox"/> Check if this is community property (see instructions)			
Other information:			Current value of the entire property?	Current value of the portion you own?
<input type="text"/>				

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here



\$42,541.00

Part 3: Describe Your Personal and Household Items**Do you own or have any legal or equitable interest in any of the following items?**

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings*Examples:* Major appliances, furniture, linens, china, kitchenware No Yes. Describe.**See Attached.****\$1,120.00****7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No Yes. Describe.**See Attached.****\$600.00****8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe.**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe.**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe.**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe.**Clothing (Adults 3. Children- 3)****\$600.00****12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe.**Wedding Rings****\$1,000.00**

13. Non-farm animals

Examples: Dogs, cats, birds, horses No Yes. Describe.**Guinee Pig (2)****\$100.00**

14. Any other personal and household items you did not already list, including any health aids you did not list

 No Yes. Give specific information.

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here →

\$3,420.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes Cash: **\$0.00**

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes Institution name:**Chime****Account Number: 6458****\$1.09**

17.1. Checking account:

Chime**Account Number: 0603****\$81.37**

17.2. Checking account:

First Convenience Bank**Account Number: 7398****\$292.91**

17.3. Checking account:

Chime**Account Number: 3922****\$5.50**

17.4. Savings account:

Cash App**Account Number: 3360****\$0.00**

17.5. Other financial account:

Cash App**Account Number: 5391****\$16.00**

17.6. Other financial account:

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Yes. Give specific information about them..... Name of entity: % of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them..... Issuer name:

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately. Type of account: Institution name:

401(k) or similar plan:	_____	_____
Pension plan:	_____	_____
IRA:	_____	_____
Retirement account:	_____	_____
Keogh:	_____	_____
Additional account:	_____	_____
Additional account:	_____	_____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes

Institution name or individual:

Electric:

Gas:

Heating oil:

Security deposit on rental unit:

Prepaid rent:

Telephone:

Water:

Rented furniture:

Other:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Yes Issuer name and description:

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

Yes. Give specific information about them. ...

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26. Patents, copyrights, trademarks, trade secrets, and other intellectual property*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific

information about them.

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27. Licenses, franchises, and other general intangibles*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific

information about them.

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Money or property owed to you?**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years.**2023 tax refund**

Federal:

\$5,598.00

State:

Local:

29. Family support*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information.

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Alimony:

Maintenance:

Support:

Divorce settlement:

Property settlement:

30. Other amounts someone owes you*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information.

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31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company

of each policy and list its value. ... Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

Yes. Give specific information.

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe each claim.

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No

Yes. Describe each claim.

35. Any financial assets you did not already list

No

Yes. Give specific information.

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here →

\$5,994.87

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**

No. Go to Part 6.

Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned No Yes. Describe.

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39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

 No Yes. Describe.

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40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade No Yes. Describe.

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41. Inventory No Yes. Describe.

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42. Interests in partnerships or joint ventures No Yes. Describe.

Name of entity:

% of ownership:

_____	_____	_____
_____	_____	_____
_____	_____	_____

43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe.

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44. Any business-related property you did not already list

 No Yes. Give specific information

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here →

\$0.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

 No. Go to Part 7. Yes. Go to line 47.

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

 No Yes

48. Crops—either growing or harvested

 No Yes. Give specific information.

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

 No Yes

50. Farm and fishing supplies, chemicals, and feed

 No Yes

51. Any farm- and commercial fishing-related property you did not already list

 No Yes. Give specific information.

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52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here →

\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

 No Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here →

\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2	→	\$0.00
56. Part 2: Total vehicles, line 5		<u>\$42,541.00</u>
57. Part 3: Total personal and household items, line 15		<u>\$3,420.00</u>
58. Part 4: Total financial assets, line 36		<u>\$5,994.87</u>
59. Part 5: Total business-related property, line 45		<u>\$0.00</u>
60. Part 6: Total farm- and fishing-related property, line 52		<u>\$0.00</u>
61. Part 7: Total other property not listed, line 54	+	<u>\$0.00</u>
62. Total personal property. Add lines 56 through 61.		<u>\$51,955.87</u>
		Copy personal property total →
63. Total of all property on Schedule A/B. Add line 55 + line 62.	+	<u>\$51,955.87</u>

Continuation Page

6.	Household goods and furnishings	
	<u>Bed (4)</u>	\$200.00
	<u>Dishes / Flatware</u>	\$50.00
	<u>Dressers / Nightstands</u>	\$400.00
	<u>Freezer</u>	\$100.00
	<u>Kitchen Table / Chairs</u>	\$200.00
	<u>Microwave</u>	\$20.00
	<u>Pots / Pans / Cookware</u>	\$50.00
	<u>Sofa</u>	\$100.00
7.	Electronics	
	<u>Laptop</u>	\$200.00
	<u>Television (2)</u>	\$200.00
	<u>Video Game System</u>	\$200.00

Fill in this information to identify your case:

Debtor 1	Joe	Nathan	Woodson
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Aisha	Nicole	Dennis
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern		District of Texas	
Case number 24-43704 (if known)			

 Check if this is an amended filingOfficial Form 106CSchedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: 2017 Chevrolet Tahoe	\$14,375.00	<input checked="" type="checkbox"/> \$0.00	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : 3.1		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
3. Are you claiming a homestead exemption of more than \$189,050? (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description:	<u>2014 Hyundai Santa Fe</u>	<u>\$9,600.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(2)</u>
VIN:	<u>5XYZU3LB1EG165213</u>			
Line from Schedule A/B:	<u>3.2</u>			
Brief description:	<u>2022 Honda Accord</u>	<u>\$18,566.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(2)</u>
VIN:	<u>(1HGCV1F39NA092279</u>			
Line from Schedule A/B:	<u>3.3</u>		<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Brief description:	<u>Sofa</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u>	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B:	<u>6</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	<u>Freezer</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u>	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B:	<u>6</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	<u>Microwave</u>	<u>\$20.00</u>	<input checked="" type="checkbox"/> <u>\$20.00</u>	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B:	<u>6</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	<u>Dishes / Flatware</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u>	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B:	<u>6</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	<u>Pots / Pans / Cookware</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u>	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B:	<u>6</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>Bed (4)</u>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: <u>6</u>			
Brief description: <u>Dressers / Nightstands</u>	<u>\$400.00</u>	<input checked="" type="checkbox"/> <u>\$400.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: <u>6</u>			
Brief description: <u>Kitchen Table / Chairs</u>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: <u>6</u>			
Brief description: <u>Television (2)</u>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: <u>7</u>			
Brief description: <u>Video Game System</u>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: <u>7</u>			
Brief description: <u>Laptop</u>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: <u>7</u>			
Brief description: <u>Clothing (Adults 3. Children- 3)</u>	<u>\$600.00</u>	<input checked="" type="checkbox"/> <u>\$600.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: <u>11</u>			
Brief description: <u>Wedding Rings</u>	<u>\$1,000.00</u>	<input checked="" type="checkbox"/> <u>\$1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(4)</u>
Line from Schedule A/B: <u>12</u>			
Brief description: <u>Guinee Pig (2)</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>13</u>			

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>Cash</u>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u>	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>16</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>Chime</u> <u>Checking account</u> <u>Acct. No.: 6458</u>	<u>\$1.09</u>	<input checked="" type="checkbox"/> <u>\$1.09</u>	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>17</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>Chime</u> <u>Checking account</u> <u>Acct. No.: 0603</u>	<u>\$81.37</u>	<input checked="" type="checkbox"/> <u>\$81.37</u>	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>17</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>First Convenience Bank</u> <u>Checking account</u> <u>Acct. No.: 7398</u>	<u>\$292.91</u>	<input checked="" type="checkbox"/> <u>\$292.91</u>	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>17</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>Cash App</u> <u>Other financial account</u> <u>Acct. No.: 5391</u>	<u>\$16.00</u>	<input checked="" type="checkbox"/> <u>\$16.00</u>	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>17</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>Cash App</u> <u>Other financial account</u> <u>Acct. No.: 3360</u>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u>	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>17</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>Chime</u> <u>Savings account</u> <u>Acct. No.: 3922</u>	<u>\$5.50</u>	<input checked="" type="checkbox"/> <u>\$5.50</u>	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>17</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>2023 tax refund</u> <u>Federal tax</u>	<u>\$5,598.00</u>	<input checked="" type="checkbox"/> <u>\$5,598.00</u>	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>28</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION**

IN RE: **Joe Nathan Woodson**
Aisha Nicole Dennis

CASE NO **24-43704**
CHAPTER **7**

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **Federal**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real Estate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicle	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4.	Watercraft, trailers, motors homes, and accessories	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$1,020.00	\$0.00	\$1,020.00	\$1,020.00	\$0.00
7.	Electronics	\$400.00	\$0.00	\$400.00	\$400.00	\$0.00
8.	Collectibles of value	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$600.00	\$0.00	\$600.00	\$600.00	\$0.00
12.	Jewelry	\$1,000.00	\$0.00	\$1,000.00	\$1,000.00	\$0.00
13.	Nonfarm animals	\$100.00	\$0.00	\$100.00	\$100.00	\$0.00
14.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17.	Deposits of money	\$396.87	\$0.00	\$396.87	\$396.87	\$0.00
18.	Bonds, mutual funds, or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Business Interests, LLC's, Partnerships, Joint Ventures and Nonpublicly traded stock	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Bonds and other financial instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interest in a qualified education fund, such as an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equitable or future interests in property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION**

IN RE: **Joe Nathan Woodson**
Aisha Nicole Dennis

CASE NO **24-43704**
CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **Federal**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
26.	Copyrights, trademarks, websites and other intellectual property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, Franchises, and other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds	\$5,598.00	\$0.00	\$5,598.00	\$5,598.00	\$0.00
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts owed to the debtor	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Interest in property from deceased	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims against third parties	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	All other claims, includes contingent/unliquidated claims, counter claims, and creditor set offs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Other financial asset	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts receivable	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Machinery, fixtures and equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer lists	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Other businessrelated property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Crops	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Other farm or fishing related property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION

IN RE: Joe Nathan Woodson
Aisha Nicole Dennis

CASE NO 24-43704
CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #2

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **Federal**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
53.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	TOTALS:	\$9,114.87	\$0.00	\$9,114.87	\$9,114.87	\$0.00

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION

IN RE: Joe Nathan Woodson
Aisha Nicole Dennis

CASE NO 24-43704
CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #3

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder

Property Description	Market Value	Lien	Equity
<u>Real Property</u>			
(None)			
<u>Personal Property</u>			
(None)			
TOTALS:	\$0.00	\$0.00	\$0.00

Non-exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
<u>Real Property</u>				
(None)				
<u>Personal Property</u>				
(None)				
TOTALS:	\$9,114.87	\$0.00	\$9,114.87	\$0.00

Fill in this information to identify your case:

Debtor 1	Joe	Nathan	Woodson
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Aisha	Nicole	Dennis
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern		District of	Texas
Case number (if known) 24-43704			

 Check if this is an amended filingOfficial Form 106DSchedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2.	List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.1	ARIVO ACCEPTANCE LLC Creditor's Name 4770 S 5600 W, STE 200 Number Street WEST VALLEY CITY, UT 84070 City State ZIP Code	Describe the property that secures the claim: 2017 Chevrolet Tahoe	\$36,836.34	\$14,375.00	\$22,461.34
	Who owes the debt? Check one.	As of the date you file, the claim is: Check all that apply.			
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent			
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated			
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed			
	<input type="checkbox"/> At least one of the debtors and another				
	<input type="checkbox"/> Check if this claim relates to a community debt	Nature of lien. Check all that apply.			
		<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)			
		<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)			
		<input type="checkbox"/> Judgment lien from a lawsuit			
		<input checked="" type="checkbox"/> Other (including a right to offset)			
		Certificate of Title			
	Date debt was incurred 10/28/2023	Last 4 digits of account number	3 3 3 1		
	Add the dollar value of your entries in Column A on this page. Write that number here:	\$36,836.34			

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any

2.2 **Autamax Arlington** **Describe the property that secures the claim:** \$17,148.00 **\$9,600.00** **\$7,548.00**

Creditor's Name
Attn: Bankruptcy

Number Street
200N Collins St

City State ZIP Code
Arlington, TX 76011

Who owes the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred 8/1/2024 Last 4 digits of account number 7 8 2 2

As of the date you file, the claim is: Check all that apply.
 Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.
 An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) **Certificate of Title**

2.3 **Conn Appliances, Inc.** **Describe the property that secures the claim:** \$3,053.00 **\$100.00** **\$2,953.00**

Creditor's Name
c/o Becket and Lee LLP

Number Street
PO Box 3002

City State ZIP Code
Malvern, PA 77381

Who owes the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred 1/1/2021 Last 4 digits of account number 0 5 7 1

Add the dollar value of your entries in Column A on this page. Write that number here: \$20,201.00

If this is the last page of your form, add the dollar value totals from all pages.
Write that number here: _____

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A	Column B	Column C
		Amount of claim <small>Do not deduct the value of collateral.</small>	Value of collateral that supports this claim	Unsecured portion if any

2.4 Conn Appliances, Inc. Describe the property that secures the claim: \$2,646.00 \$200.00 \$2,446.00

Creditor's Name
c/o Becket and Lee LLP

PO Box 3002
Number Street
Malvern, PA 77381

City State ZIP Code

Who owes the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.
 Contingent
 Unliquidated
 Disputed
 An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) Purchase Money

Date debt was incurred 9/1/2021 Last 4 digits of account number 0 0 7 2

2.5 Flagship Credit Acceptance Describe the property that secures the claim: \$36,223.00 \$18,566.00 \$17,657.00

Creditor's Name
Attn: Bankruptcy

PO Box 965
Number Street
Chadds Ford, PA 19317

City State ZIP Code

Who owes the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.
 Contingent
 Unliquidated
 Disputed
 An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) Certificate of Title

Date debt was incurred 1/1/2023 Last 4 digits of account number 1 0 0 1

Add the dollar value of your entries in Column A on this page. Write that number here: \$38,869.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$95,906.34

Fill in this information to identify your case:

Debtor 1	Joe	Nathan	Woodson
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Aisha	Nicole	Dennis
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern		District of	Texas
Case number 24-43704 (if known)			

 Check if this is an amended filingOfficial Form 106E/FSchedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.
 Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.1	American Honda Finance Corporation Nonpriority Creditor's Name National Bankruptcy Center P.O. Box 168088 Number Street Irving, TX 75016 City State ZIP Code	Last 4 digits of account number 9 3 6 2 When was the debt incurred? _____
		\$4,296.60
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply.
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Repo Deficiency
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2:

Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
4.2	ARIVO ACCEPTANCE LLC	Nonpriority Creditor's Name	Last 4 digits of account number	<u>7</u> <u>4</u> <u>1</u> <u>8</u> <u>\$5,015.04</u>
		4770 S 5600 W,	When was the debt incurred?	<u>11/2/2023</u>
	STE 200	Number Street	As of the date you file, the claim is: Check all that apply.	
	WEST VALLEY CITY, UT 84070	City State ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Who incurred the debt? Check one.			
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
	Type of NONPRIORITY unsecured claim:			
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Auto Accident Deficiency</u>			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.3	Chimefinal	Nonpriority Creditor's Name	Last 4 digits of account number	<u>7</u> <u>2</u> <u>2</u> <u>8</u> <u>\$67.00</u>
	Po Box 417	Number Street	When was the debt incurred?	<u>5/1/2022</u>
	San Francisco, CA 94104	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Who incurred the debt? Check one.			
	<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
	Type of NONPRIORITY unsecured claim:			
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditLineSecured</u>			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4	Cook Children's	Last 4 digits of account number	<u>3</u> <u>8</u> <u>7</u> <u>7</u>	\$21,927.57
Nonpriority Creditor's Name		When was the debt incurred?		
P.O. Box 733720				
Number	Street	As of the date you file, the claim is: Check all that apply.		
Dallas, TX 75373-3720		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.5	Crescent Bank & Trust	Last 4 digits of account number	<u>4</u> <u>1</u> <u>3</u> <u>1</u>	\$6,482.08
Nonpriority Creditor's Name		When was the debt incurred?		
P.O. Box 2829		<u>2/1/2024</u>		
Number	Street	As of the date you file, the claim is: Check all that apply.		
Addison, TX 70161-1813		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Repo Deficiency</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.6	Envision Physician Services	Last 4 digits of account number	<u>3</u> <u>8</u> <u>5</u> <u>9</u>	\$75.00
Nonpriority Creditor's Name		When was the debt incurred?		
PO Box 99101 # 530				
Number	Street	As of the date you file, the claim is: Check all that apply.		
Las Vegas, NV 89193		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.7	FH Cann & Associates	Last 4 digits of account number	<u>3</u> <u>3</u> <u>1</u> <u>0</u>	\$219.57
Nonpriority Creditor's Name		When was the debt incurred?		
100 Domain Drive Sutie 200				
Number	Street	As of the date you file, the claim is: Check all that apply.		
Exeter, NH 03833		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting For -Navy Federal Credit Union</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.8 <u>Fig Loans</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>335 Madison Ave</u> Number Street <u>Manhattan, NY 10017</u> City State ZIP Code	Last 4 digits of account number <u>6 0 6 9</u> When was the debt incurred? <u>2/1/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Total claim <u>\$434.00</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Installment Loan</u>		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.9 <u>Heart and Vascular Specialists</u> Nonpriority Creditor's Name <u>PO Box 668</u> Number Street <u>Brentwood, TN 37024</u> City State ZIP Code		
Last 4 digits of account number <u>3 0 5 5</u> When was the debt incurred?		
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.10	Heart and Vascular Specialists	Last 4 digits of account number	<u>3</u> <u>0</u> <u>5</u> <u>5</u>	\$841.84
Nonpriority Creditor's Name		When was the debt incurred?		
PO Box 668		<u>11/22/2024</u>		
Number	Street	As of the date you file, the claim is: Check all that apply.		
Brentwood, TN 37024		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.11	IC Systems, Inc	Last 4 digits of account number	<u>8</u> <u>4</u> <u>5</u> <u>2</u>	\$836.00
Nonpriority Creditor's Name		When was the debt incurred?		
Attn: Bankruptcy		<u>3/1/2022</u>		
Number	Street	As of the date you file, the claim is: Check all that apply.		
PO Box 64444		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting For -ATT U-VERSE</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.12	IC Systems, Inc Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number	<u>9</u> <u>5</u> <u>7</u> <u>5</u>	\$78.00
	PO Box 64444 Number Street Saint Paul, MN 55164	When was the debt incurred?	<u>1/1/2022</u>	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collection Agency</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.13	Landmark Strategy Group, LLC Nonpriority Creditor's Name C/O Weinstein & Riley, P.S.	Last 4 digits of account number	<u>0</u> <u>2</u> <u>2</u> <u>1</u>	\$3,581.60
	749 GATEWAY, SUITE G-601 Number Street ABILENE, TX 98121	When was the debt incurred?		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.14 <u>Medical Center Of Arlington</u> Nonpriority Creditor's Name <u>Resurgent Capital Services</u>	Last 4 digits of account number _____	<u>\$3,660.53</u>
PO Box 1927 Number Street Greenville, SC 37229 City State ZIP Code		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt		
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.15 <u>Navy Federal Credit Union</u> Nonpriority Creditor's Name <u>P.O. Box 23900</u>		
Number Street		
MERRIFIELD, VA 22119 City State ZIP Code		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.16	Navy Federal Credit Union	Last 4 digits of account number	<u>1</u> <u>1</u> <u>9</u> <u>1</u>	\$251.55
Nonpriority Creditor's Name		When was the debt incurred?		
P.O. Box 3000				
Number	Street	As of the date you file, the claim is: Check all that apply.		
Merrifield, VA 22119		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.17	NTTA	Last 4 digits of account number	<u>9</u> <u>5</u> <u>1</u> <u>0</u>	\$77.68
Nonpriority Creditor's Name		When was the debt incurred?		
Attn: Bankruptcy				
PO Box 660244		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Dallas, TX 75266				
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Tolls</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.18	<u>NTTA</u>	Last 4 digits of account number	<u>3</u> <u>5</u> <u>2</u> <u>0</u>	\$14.78
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Nonpriority Creditor's Name

Attn: BankruptcyPO Box 660244

Number Street

Dallas, TX 75266

City State ZIP Code

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Tolls

Is the claim subject to offset?

- No
 Yes

4.19	<u>NTTA</u>	Last 4 digits of account number	<u>8</u> <u>0</u> <u>6</u> <u>9</u>	\$512.38
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Nonpriority Creditor's Name

Attn: BankruptcyPO Box 660244

Number Street

Dallas, TX 75266

City State ZIP Code

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Tolls

Is the claim subject to offset?

- No
 Yes

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.20	NTTA Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number	<u>8</u> <u>0</u> <u>6</u> <u>9</u>	\$922.08
	Number Street	When was the debt incurred?		
	PO Box 660244 Dallas, TX 75266	As of the date you file, the claim is: Check all that apply.		
	City State ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input checked="" type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Tolls</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.21	NTTA Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number	<u>8</u> <u>9</u> <u>8</u> <u>8</u>	\$1,591.58
	Number Street	When was the debt incurred?	<u>11/21/24</u>	
	5900 W. Plano Parkway Plano, TX 75093	As of the date you file, the claim is: Check all that apply.		
	City State ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input checked="" type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Tolls</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.22	NTTA Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number	<u>9</u> <u>6</u> <u>0</u> <u>4</u>	\$29.36
	5900 W. Plano Parkway Number Street Plano, TX 75093	When was the debt incurred?	<u>11/07/24</u>	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Tolls</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.23	Portfolio Recovery Associates, LLC Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number	<u>6</u> <u>1</u> <u>9</u> <u>6</u>	\$739.00
	120 Corporate Blvd Number Street Norfolk, VA 23502	When was the debt incurred?	<u>12/1/2018</u>	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting For -COMENITY CAPITAL BANK</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<u>4.24</u>	<u>Portfolio Recovery Associates, LLC</u>	Last 4 digits of account number	<u>8 7 8 6</u>	<u>\$685.00</u>
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Nonpriority Creditor's Name

Attn: Bankruptcy120 Corporate Blvd

Number Street

Norfolk, VA 23502

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Collecting For -COMENITY BANK

Is the claim subject to offset?

- No
 Yes

<u>4.25</u>	<u>Portfolio Recovery Associates, LLC</u>	Last 4 digits of account number	<u>8 1 8 5</u>	<u>\$674.00</u>
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Nonpriority Creditor's Name

Attn: Bankruptcy120 Corporate Blvd

Number Street

Norfolk, VA 23502

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Collecting For -CAPITAL ONE BANK USA N.A.

Is the claim subject to offset?

- No
 Yes

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.26 Portfolio Recovery Associates, LLC Nonpriority Creditor's Name Attn: Bankruptcy 120 Corporate Blvd Norfolk, VA 23502 City State ZIP Code Last 4 digits of account number 6 8 1 8 \$650.00

When was the debt incurred? 11/1/2018

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify Collecting For -COMENITY BANK

Is the claim subject to offset?

- No
- Yes

4.27 Possible Finance Nonpriority Creditor's Name 2231 First Avenue Suite B Number Street Last 4 digits of account number 4 X K A \$421.00

When was the debt incurred? 4/1/2024

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify Installment Loan

Is the claim subject to offset?

- No
- Yes

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.28 **Spring Oaks Capital SPV, LLC** Last 4 digits of account number 9 1 3 8 \$2,336.68

Nonpriority Creditor's Name

Attn: Bankruptcy**1400 Crossways Blvd Suite 100B**

Number Street

Chesapeake, VA 23320

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify Collecting For -12 BMG LOANSATWORK LLC

Is the claim subject to offset?

- No
- Yes

4.29 **Sunbit Financial** Last 4 digits of account number 9 6 6 0 \$191.00

Nonpriority Creditor's Name

Attn: Bankruptcy**10880 Wilshire Blv Suite 870**

Number Street

Los Angeles, CA 90024

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify InstallmentSalesContract

Is the claim subject to offset?

- No
- Yes

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.30	Sunbit Financial Nonpriority Creditor's Name <u>Attn: Bankruptcy</u>	Last 4 digits of account number	<u>3 8 1 4</u>	\$169.00
	10880 Wilshire Blv Suite 870 Number Street Los Angeles, CA 90024	When was the debt incurred?	<u>8/17/2024</u>	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>InstallmentSalesContract</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.31	T Mobile/T-Mobile USA Inc Nonpriority Creditor's Name <u>by AIS Infosource, LP as agent</u>	Last 4 digits of account number	<u>4 3 5 1</u>	\$555.65
	PO Box 248848 Number Street Oklahoma City, OK 75287	When was the debt incurred?	<u>1/31/2024</u>	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting For -T-MOBILE</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<u>4.32</u> Target NB	Last 4 digits of account number	<u>8</u> <u>0</u> <u>6</u> <u>3</u>	\$547.00
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Nonpriority Creditor's Name

P.O. box 673

Number Street

When was the debt incurred?

10/30/2017Minneapolis, MN 55440-0673

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify CreditCard

Is the claim subject to offset?

- No
 Yes

<u>4.33</u> Transworld Systems	Last 4 digits of account number	<u>4</u> <u>2</u> <u>9</u> <u>4</u>	\$1,362.90
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Nonpriority Creditor's Name

8131 LBJ Freeway Ste. 200

Number Street

When was the debt incurred?

Dallas, TX 75251

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Collecting For -IKids Pediatric Dentistry

Is the claim subject to offset?

- No
 Yes

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.34	TX Tag	Last 4 digits of account number	<u>3</u> <u>6</u> <u>0</u> <u>4</u>	\$20.46
Nonpriority Creditor's Name		When was the debt incurred?		
PO Box 650749				
Number	Street	As of the date you file, the claim is: Check all that apply.		
Dallas, TX 75265		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Tolls				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.35	TX Tag	Last 4 digits of account number	<u>3</u> <u>6</u> <u>0</u> <u>4</u>	\$19.31
Nonpriority Creditor's Name		When was the debt incurred?		
PO Box 650749				
Number	Street	As of the date you file, the claim is: Check all that apply.		
Dallas, TX 75265		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Tolls				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.36	TX Tag Nonpriority Creditor's Name PO Box 650749 Number Street Dallas, TX 75265 City State ZIP Code	Last 4 digits of account number When was the debt incurred?	<u>3</u> <u>3</u> <u>1</u> <u>5</u> <u>11/20/24</u>	\$23.91
<p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Tolls</u></p>				
4.37	U.S. Department of Education c/o Nelnet Nonpriority Creditor's Name 121 S 13th St Number Street Lincoln, NE 68501 City State ZIP Code	Last 4 digits of account number When was the debt incurred?	<u>1</u> <u>9</u> <u>2</u> <u>7</u> <u>6/1/2015</u>	\$46,483.15
<p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____</p>				

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.38 <u>United Healthcare Insurance Company</u> Nonpriority Creditor's Name <u>PO Box 740800</u> Number Street <u>Atlanta, GA 30374</u> City State ZIP Code	Last 4 digits of account number <u>3 7 0 1</u> When was the debt incurred?	<u>\$283.00</u>
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.39 <u>United Healthcare Insurance Company</u> Nonpriority Creditor's Name <u>PO Box 740800</u> Number Street <u>Atlanta, GA 30374</u> City State ZIP Code		
Last 4 digits of account number <u>8 9 3 7</u> When was the debt incurred?		
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<u>4.40</u>	<u>United Healthcare Insurance Company</u>	Last 4 digits of account number	<u>3 7 0 1</u>	<u>\$3,660.53</u>
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Nonpriority Creditor's Name

PO Box 740800

Number Street

When was the debt incurred?

Atlanta, GA 30374

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Medical Bill

Is the claim subject to offset?

- No
 Yes

<u>4.41</u>	<u>United Healthcare Insurance Company</u>	Last 4 digits of account number	<u>3 7 0 1</u>	<u>\$75.00</u>
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Nonpriority Creditor's Name

PO Box 740800

Number Street

When was the debt incurred?

Atlanta, GA 30374

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Medical Bill

Is the claim subject to offset?

- No
 Yes

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.42	United Healthcare Insurance Company	Last 4 digits of account number	<u>3</u> <u>7</u> <u>0</u> <u>1</u>	\$386.16
Nonpriority Creditor's Name		When was the debt incurred?		
PO Box 740800				
Number	Street	As of the date you file, the claim is: Check all that apply.		
Atlanta, GA 30374		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.43	Valor Intelligent Processing	Last 4 digits of account number	<u>4</u> <u>4</u> <u>5</u> <u>7</u>	\$37.56
Nonpriority Creditor's Name		When was the debt incurred?		
PO Box 207899				
Number	Street	As of the date you file, the claim is: Check all that apply.		
Dallas, TX 75320		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting For -NTTA</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.44	Valor Intelligent Processing	Last 4 digits of account number	<u>5 0 7 1</u>	\$163.58
Nonpriority Creditor's Name		When was the debt incurred?		
PO Box 207899				
Number	Street	As of the date you file, the claim is: Check all that apply.		
Dallas, TX 75320		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collecting For -NTTA				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.45	Vance & Huffman Llc	Last 4 digits of account number	<u>0 3 4 5</u>	\$750.00
Nonpriority Creditor's Name		When was the debt incurred?		
Attn: Bankruptcy Attn: Bankruptcy		<u>4/1/2024</u>		
Number	Street	As of the date you file, the claim is: Check all that apply.		
55 Monette Pkwy , Ste 100		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collecting For -BUILD CARD REPUBLIC BANK				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	<u>\$0.00</u>

		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$46,483.15</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$65,643.93</u>
	6j. Total. Add lines 6f through 6i.	<u>\$112,127.08</u>

Fill in this information to identify your case:

Debtor 1	Joe	Nathan	Woodson
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Aisha	Nicole	Dennis
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern District of Texas		
Case number (if known)	24-43704		

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	Aaron's LLC Name 1435 W Arbrook Blvd Number Street Arlington, TX 76015 City State ZIP Code	Furniture Lease Contract to be ASSUMED
2.2	Shady Valley Square Apts Name 692 N Cypress St Number Street Orange, CA 92867 City State ZIP Code	Residential Lease Contract to be ASSUMED
2.3	Spectrum Name PO Box 60074 Number Street City of Industry, CA 91716 City State ZIP Code	Cell phone service contract Contract to be ASSUMED
2.4	Name Number Street City State ZIP Code	

Fill in this information to identify your case:

Debtor 1	Joe	Nathan	Woodson
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Aisha	Nicole	Dennis
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern		District of	Texas
Case number 24-43704 (if known)			

 Check if this is an amended filingOfficial Form 106HSchedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No

Yes. In which community state or territory did you live? **Texas**. Fill in the name and current address of that person.

Aisha Nicole Dennis

Name of your spouse, former spouse, or legal equivalent

3603 Shady Valley Drive Apt 214

Number Street

Arlington, TX 76013

City State ZIP Code

Yes. In which community state or territory did you live? **Texas**. Fill in the name and current address of that person.

Joe Nathan Woodson

Name of your spouse, former spouse, or legal equivalent

3603 Shady Valley Drive Apt 214

Number Street

Arlington, TX 76013

City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
Check all schedules that apply:	
3.1	<input type="checkbox"/> Schedule D, line _____
Name	<input type="checkbox"/> Schedule E/F, line _____
Number Street	<input type="checkbox"/> Schedule G, line _____
City State ZIP Code	

Debtor 1

Joe Nathan Woodson

Debtor 2

Aisha Nicole Dennis

First Name Middle Name Last Name

Additional Page to List More Codebtors

Column 1: Your codebtor**Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.2

Name _____

 Schedule D, line _____

Number _____ Street _____

 Schedule E/F, line _____

City _____ State _____ ZIP Code _____

 Schedule G, line _____

Fill in this information to identify your case:

Debtor 1	<u>Joe</u>	<u>Nathan</u>	<u>Woodson</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Aisha</u>	<u>Nicole</u>	<u>Dennis</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u>24-43704</u>		

Check if this is:

- An amended filing
 - A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

- #### **1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

<p>Debtor 1</p> <p><input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not Employed</p> <p><u>Operation Supervisor</u></p> <p><u>Ocean Beauty Seafood</u></p> <p><u>Box 70739</u> Number Street</p> <hr/> <hr/> <hr/> <p>Seattle, WA 98127</p> <p>City State Zip Code</p> <p>? 1 year 8 months</p>	<p>Debtor 2 or non-filing spouse</p> <p><input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not Employed</p> <p><u>Specialist</u></p> <p><u>Walgreens</u></p> <p><u>108 Wilmot Rd MS 2002</u> Number Street</p> <hr/> <hr/> <hr/> <p>Deerfield, IL 60015</p> <p>City State Zip Code</p> <p>2 months</p>
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Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1	For Debtor 2 or non-filing spouse
<u>\$6,128.31</u>	<u>\$2,544.59</u>
+ <u>\$0.00</u>	+ <u>\$0.00</u>
<u>\$6,128.31</u>	<u>\$2,544.59</u>

Debtor 1
Debtor 2

Joe	Nathan	Woodson
Aisha	Nicole	Dennis
First Name	Middle Name	Last Name

Case number (if known) 24-43704

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... →	4. <u>\$6,128.31</u>	<u>\$2,544.59</u>
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. <u>\$862.23</u>	<u>\$207.88</u>
5b. Mandatory contributions for retirement plans	5b. <u>\$0.00</u>	<u>\$0.00</u>
5c. Voluntary contributions for retirement plans	5c. <u>\$188.46</u>	<u>\$0.00</u>
5d. Required repayments of retirement fund loans	5d. <u>\$0.00</u>	<u>\$0.00</u>
5e. Insurance	5e. <u>\$3.60</u>	<u>\$0.00</u>
5f. Domestic support obligations	5f. <u>\$0.00</u>	<u>\$0.00</u>
5g. Union dues	5g. <u>\$0.00</u>	<u>\$0.00</u>
5h. Other deductions. Specify: _____	5h. + <u>\$0.00</u>	+ <u>\$0.00</u>
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. <u>\$1,054.29</u>	<u>\$207.88</u>
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. <u>\$5,074.02</u>	<u>\$2,336.71</u>
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. <u>\$0.00</u>	<u>\$0.00</u>
8b. Interest and dividends	8b. <u>\$0.00</u>	<u>\$0.00</u>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. <u>\$0.00</u>	<u>\$392.24</u>
8d. Unemployment compensation	8d. <u>\$0.00</u>	<u>\$0.00</u>
8e. Social Security	8e. <u>\$0.00</u>	<u>\$0.00</u>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. <u>\$0.00</u>	<u>\$0.00</u>
8g. Pension or retirement income	8g. <u>\$0.00</u>	<u>\$0.00</u>
8h. Other monthly income. Specify: _____	8h. + <u>\$0.00</u>	+ <u>\$0.00</u>
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. <u>\$0.00</u>	<u>\$392.24</u>
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10. <u>\$5,074.02</u>	+ <u>\$2,728.95</u> = <u>\$7,802.97</u>
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. + <u>\$0.00</u>	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies		12. <u>\$7,802.97</u>
13. Do you expect an increase or decrease within the year after you file this form?	<input checked="" type="checkbox"/> No. _____	
	<input type="checkbox"/> Yes. Explain: _____	
Combined monthly income		

Fill in this information to identify your case:

Debtor 1	Joe	Nathan	Woodson
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Aisha	Nicole	Dennis
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern District of Texas		
Case number (if known)	24-43704		

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

 MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes. Fill out this information for each dependent.....	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not list Debtor 1 and Debtor 2.			Child	15	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.
Do not state the dependents' names.			Child	11	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.
			Child	8	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.
			Child	20	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.
					<input type="checkbox"/> No. <input type="checkbox"/> Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

- No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I).

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues

Your expenses

4.	\$1,399.00
4a.	\$0.00
4b.	\$0.00
4c.	\$30.00
4d.	\$0.00

Debtor 1
Debtor 2

Joe	Nathan	Woodson
Aisha	Nicole	Dennis
First Name	Middle Name	Last Name

Case number (if known) 24-43704

		Your expenses
5.	Additional mortgage payments for your residence , such as home equity loans	5. <u>\$0.00</u>
6.	Utilities:	
6a.	Electricity, heat, natural gas	6a. <u>\$450.00</u>
6b.	Water, sewer, garbage collection	6b. <u>\$200.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. <u>\$340.00</u>
6d.	Other. Specify: <u>Streaming Services</u>	6d. <u>\$50.00</u>
7.	Food and housekeeping supplies	7. <u>\$1,725.00</u>
8.	Childcare and children's education costs	8. <u>\$0.00</u>
9.	Clothing, laundry, and dry cleaning	9. <u>\$300.00</u>
10.	Personal care products and services	10. <u>\$300.00</u>
11.	Medical and dental expenses	11. <u>\$200.00</u>
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. <u>\$600.00</u>
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. <u>\$300.00</u>
14.	Charitable contributions and religious donations	14. <u>\$0.00</u>
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. <u>\$0.00</u>
15b.	Health insurance	15b. <u>\$160.00</u>
15c.	Vehicle insurance	15c. <u>\$780.00</u>
15d.	Other insurance. Specify: _____	15d. <u>\$0.00</u>
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. <u>\$0.00</u>
17.	Installment or lease payments:	
17a.	Car payments for Vehicle 1 <u>2022 Honda Accord</u>	17a. <u>\$836.00</u>
17b.	Car payments for Vehicle 2	17b. <u>\$0.00</u>
17c.	Other. Specify: _____	17c. <u>\$0.00</u>
17d.	Other. Specify: _____	17d. <u>\$0.00</u>
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. <u>\$0.00</u>
19.	Other payments you make to support others who do not live with you. Specify: _____	19. <u>\$0.00</u>
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a.	Mortgages on other property	20a. <u>\$0.00</u>
20b.	Real estate taxes	20b. <u>\$0.00</u>
20c.	Property, homeowner's, or renter's insurance	20c. <u>\$0.00</u>
20d.	Maintenance, repair, and upkeep expenses	20d. <u>\$0.00</u>
20e.	Homeowner's association or condominium dues	20e. <u>\$0.00</u>

Debtor 1
Debtor 2

First Name	Joe Aisha	Middle Name	Nathan Nicole	Last Name	Woodson Dennis
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Case number (if known) 24-43704

21. Other. Specify: Pet Expenses (Insurance and Food)

21. + \$200.00

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$7,870.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$7,870.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$7,802.97

23b. Copy your monthly expenses from line 22c above.

23b. - \$7,870.00

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. (\$67.03)

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.
 Yes.

Fill in this information to identify your case:

Debtor 1	Joe	Nathan	Woodson
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Aisha	Nicole	Dennis
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern District of Texas		
Case number (if known)	24-43704		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets

Value of what you own

1. Schedule A/B: Property (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.....	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$51,955.87
1c. Copy line 63, Total of all property on Schedule A/B.....	\$51,955.87

Part 2: Summarize Your Liabilities

Your liabilities

Amount you owe

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of Schedule D.....	\$95,906.34
---	--------------------

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	+ \$112,127.08

Your total liabilities

\$208,033.42

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I.....	\$7,802.97
---	-------------------

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....	\$7,870.00
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Debtor 1
Debtor 2

First Name	Joe Aisha	Middle Name	Nathan Nicole	Last Name	Woodson Dennis
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Case number (if known) 24-43704

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debt do you have?

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the **Statement of Your Current Monthly Income**: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$6,098.54

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.) \$0.00

9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00

9d. Student loans. (Copy line 6f.) \$46,483.15

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$0.00

9g. Total. Add lines 9a through 9f. **\$46,483.15**

Fill in this information to identify your case:

Debtor 1	Joe	Nathan	Woodson
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Aisha	Nicole	Dennis
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern District of Texas		
Case number (if known)	24-43704		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of person _____ Attach *Bankruptcy Petitioner's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Joe Nathan Woodson
Joe Nathan Woodson , Debtor 1

Date 12/31/2024
MM/ DD/ YYYY

X /s/ Aisha Nicole Dennis
Aisha Nicole Dennis, Debtor 2

Date 12/31/2024
MM/ DD/ YYYY

IN THE UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION

IN RE: **Joe Nathan Woodson**
Aisha Nicole Dennis

CASE NO 24-43704
CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 12/31/2024 Signature /s/ Joe Nathan Woodson
Joe Nathan Woodson , Debtor

Date 12/31/2024 Signature /s/ Aisha Nicole Dennis
Aisha Nicole Dennis, Joint Debtor

Aaron's LLC
1435 W Arbrook Blvd
Arlington, TX 76015

Aisha Nicole Dennis
3603 Shady Valley Drive Apt 214
Arlington, TX 76013

Allmand Law Firm, PLLC
860 Airport Fwy Ste 401
Hurst, TX 76054-3264

American Honda Finance
Corporation
National Bankruptcy Center
P.O. Box 168088
Irving, TX 75016

ARI VO ACCEPTANCE LLC
4770 S 5600 W, STE 200
WEST VALLEY CITY, UT 84070

Attorney General of Texas
Bankruptcy Collection Division
PO Box 12017
Austin, TX 78711

Automax Arlington
Attn: Bankruptcy 200N Collins St
Arlington, TX 76011

Chimefinal
Po Box 417
San Francisco, CA 94104

Conn Appliances, Inc.
c/o Becket and Lee LLP
PO Box 3002
Malvern, PA 77381

Cook Children's
P.O. Box 733720
Dallas, TX 75373-3720

Crescent Bank & Trust
P.O. Box 2829
Addison, TX 70161-1813

Envision Physician Services
PO Box 99101 # 530
Las Vegas, NV 89193

FH Cann & Associates
100 Domain Drive Suite 200
Exeter, NH 03833

Fig Loans
Attn: Bankruptcy 335 Madison Ave
Manhattan, NY 10017

Flagship Credit Acceptance
Attn: Bankruptcy
PO Box 965
Chadds Ford, PA 19317

Heart and Vascular Specialists
PO Box 668
Brentwood, TN 37024

IC Systems, Inc
Attn: Bankruptcy
PO Box 64444
Saint Paul, MN 55164

Internal Revenue Service
Centralized Insolvency Operations
PO Box 7346
Philadelphia, PA 19101-7346

Joe Nathan Woodson
3603 Shady Valley Drive Apt 214
Arlington, TX 76013

Landmark Strategy Group,
LLC
C/O Weinstein & Riley, P.S.
749 GATEWAY, SUITE G-601
ABILENE, TX 98121

Linebarger Goggan Blair &
Sampson, LLP
2777 N. Stemmons Freeway, Ste 1000
Dallas, TX 75207

Medical Center Of Arlington
Resurgent Capital Services
PO Box 1927
Greenville, SC 37229

Navy Federal Credit Union
P.O. Box 23900
MERRIFIELD, VA 22119

Navy Federal Credit Union
P.O. Box 3000
Merrifield, VA 22119

NTTA
Attn: Bankruptcy
PO Box 660244
Dallas, TX 75266

NTTA
Attn: Bankruptcy
5900 W. Plano Parkway
Plano, TX 75093

NTTA
PO Box 660244
Dallas, TX 75266

Portfolio Recovery Associates,
LLC
Attn: Bankruptcy
120 Corporate Blvd
Norfolk, VA 23502

Possible Finance
2231 First Avenue Suite B
Seattle, WA 98121

Shady Valley Square Apts
692 N Cypress St
Orange, CA 92867

Spectrum
PO Box 60074
City of Industry, CA 91716

Spring Oaks Capital
SPV, LLC
Attn: Bankruptcy
1400 Crossways Blvd Suite 100B
Chesapeake, VA 23320

Sunbit Financial
Attn: Bankruptcy 10880 Wilshire Blv Suite
870
Los Angeles, CA 90024

T Mobile/T-Mobile USA Inc
by AIS Infosource, LP as agent
PO Box 248848
Oklahoma City, OK 75287

Target NB
P.O. box 673
Minneapolis, MN 55440-0673

Texas Alcoholic Beverage
Comm
Licenses and Permits Division
PO Box 13127
Austin, TX 78711-3127

Transworld Systems
8131 LBJ Freeway Ste. 200
Dallas, TX 75251

TX Tag
PO Box 650749
Dallas, TX 75265

U.S. Department of Education
c/o Nelnet
121 S 13th St
Lincoln, NE 68501

United Healthcare Insurance
Company
PO Box 740800
Atlanta, GA 30374

United States Attorney
—NORTH
3rd. Floor, 1100 Commerce St
Dallas, TX 75242

United States Trustee
1100 Commerce Street Room 1254
Dallas, TX 75242

US Attorney General
US Department of Justice
950 Pennsylvania Ave, NW
Washington, DC 20530

Valor Intelligent Processing
PO Box 207899
Dallas, TX 75320

Vance & Huffman Llc
Attn: Bankruptcy Attn: Bankruptcy
55 Monette Pkwy , Ste 100
Smithfield, VA 23430

Wehner MGMT
DBA Shady Valley Square Apts
3206 Green Tee Dr
Arlington, TX 76013